POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ML		06-20,-01
O.I.P.E. CLASSIFIER		49	6/29/01
FORMALITY REVIEW	H-S	866	08·14·01
RESPONSE FORMALITY REVIEW	A.T	1071	10 30 01

INDEX OF CLAIMS

✔ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Final	Original	Date							
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612 10-30-01

If more than 150 claims or 10 actions
staple additional sheet here

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